Infant Mortality Rate

*580. KUMARI FRIDA TOPNO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether there is an increase in the infant mortality rate in tribal dominated areas due to lack of nutritious food and Child Health Care Centres;

(b) if so, whether the Government propose to declare all tribal dominated blocks as Child Development Blocks to take care of such children; and

(c) the total number of Child Development Blocks functioning at present and the number of children being benefited by them?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D.K. THARADEVI SIDDHARTHA): (a) to (c). A statement is laid on the Table of the House.

STATEMENT

The Sample Registration System of the Registrar General of India does not provide separate estimates of Infant Mortality Rate for the tribal dominated areas. However, the overall Infant Mortality Rate for the country has declined from 91 per thousand live births in 1989 to 80 per thousand live births in 1990.

The Department of Women & Child Development in the Ministry of Human Resource Development has been implementing an Integrated Child Development Services (ICDS) Scheme since 1975, which are exclusively located in rural and tribal blocks and urban slums. At the end of 1991, a total of 2,694 ICDS projects were in operation benefitting 139 lakh children below 6 years. Out of these, 713 projects are in the tribal blocks and provide services to 60.30 lakh children under these projects.

Government's endeavour is to universalise the ICDS Scheme. However, it is expanding in a phased manner depending upon the availability of resources.

The Ministry of Health and Family Welfare have relaxed the norms for establishment of Primary Health Centres (PHCs) and Sub centres in tribal/hilly areas to ensure better availability of services in these areas. These relaxed norms provide for a PHC for every 20,000 population in the tribal/hilly areas, as against 30,000 population in other areas and a Sub-Centre for every 3,000 population in tribal/hilly areas, as against 5,000 population in other areas.

MR. SPEAKER: It is a very good question.

KUMARI FRIDA TOPNO: Sir, I would like to know whether the Government have identified any specific zones for mothers and children who are mostly affected by various diseases due to lack of nutritious food and if so what are the proposals before the Government in this regard. I would also like to know whether the Government would consider providing mobile medical units also in addition to the Primary Health Centres and Sub-Centres in these areas.

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI M.L. FOTEDAR): Sir, I agree that the question is very good and very important. But I have adopted it very reluctantly in the sense that this pertains to the tribal welfare and women & Child Development Department. Because of the infant mortality it has been put down for the Ministry of Health. Otherwise, it is a subject which does not pertain to the Ministry of Health. It pertains to the Ministry of Human Resource Development. If the hon. Member wants to ask me anything about infant mortality rate, so far as tribal areas are concerned, I would like to say that we do not maintain any separate record of tribals or castes. But the annual record is maintained of the country as a whole, of the state of a whole. I can assure the hon. Member that the Infant Mortality

rate has come down substantially from 91 to 80 per thousand births.

SHRI ATAL BIHARI VAJPAYEE: It has come down marginally, not substantially. I have the figure with me. (*interruptions*)

KUMARI FRIDA TOPNO: I want to know whether, in future, separate information can be asked in respect of Infant Mortality from different sources and kept separately. Is it possible to have the number of Infant Mortality rate in respect of the tribal areas in future?

MR. SPEAKER : It should be possible.

SHRI M.L. FOTEDAR: Sir, Shri Atal Bihari Vajpayee asked the question that I should not have said 'substantially'. I will leave the word to him whether it should be 'substantially' or 'marginally'. I can tell him that in 1989, the IMR was 91; in 1990 it was 80. I leave the judgement to him whether it is substantial or it is marginal.

MR. SPEAKER : I think it is marginal.

SHRI M.L. FOTEDAR: I accept the word. Secondly, the hon. Member has asked about the tribal areas. In the tribal areas also it is coming down. Efforts are being made so that the tribal areas in Orissa are looked after.

[*Translation*]

DR. P.R. GANGWAR: Mr. Speaker, Sir, in the areas where child development scheme have been launched, the child is not being developed but the employees and officers are reaping harvest as the funds being made available to them for the child development is not being used for children and instead it is being used by employees and officers themselves. The employees and officers embezzle all the material and do not give it to children and mothers. Has the Government framed a scheme to check it?

[*English*]

MR. SPEAKER : Anyway, the Question Hour is over.

WRITTEN ANSWERS TO QUESTIONS

Educationally Backward Districts

*576. SHRI PARASRAM BHARDWAJ: Will the Minister of HUMAN RESOURCE DEVELOPMENT be pleased to state:

(a) the number of educationally backward districts in the country;

(b) the action plan for ensuring education for all by 2000 A. D.; and

(c) the steps taken in that direction?

THE MINISTER OF HUMAN RESOURCE DEVELOPMENT (SHRI ARJUN SINGH): (a) From the point of view of incidence of illiteracy there are 269 districts which have the literacy rate below the national average.

(b) and (c). The Plan of Action for ensuring Education for all by 2000 AD includes the following:

(i) Universal access to elementary education for all children upto 14 years of age, by providing primary schools within 1 km. distance for all habitations with a population of 300 (200 in cased of tribal hilly and desert areas during the VIIIth Plan.

(ii) Universal participation till they complete primary education through formal or non-formal education programmes, by reducing the dropout rates between Classes I to V and I to VIII from the existing